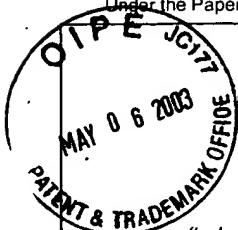


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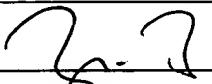


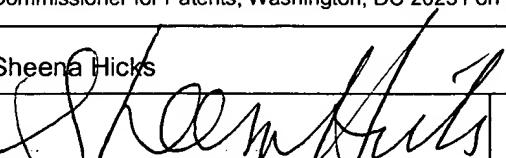
TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/811,237
		Filing Date	March 15, 2001
		First Named Inventor	Karapet Ablabutyan et al.
		Group Art Unit	3652
		Examiner Name	Keenan, James W..
Total Number of Pages in This Submission		Attorney Docket Number	23451-037

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CID, Number of CD(s) _____ <input type="checkbox"/> Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>): Patent Application Fee Determination Record Form PTO/SB/06 Form (in duplicate) (1 pg.); Preliminary Amendment (8 pgs); Information Disclosure Statement under 37 CFR 1.97 and Form PTO/SB/08A (4 pgs.); 25 Cited References; Certificate of Mailing (1 pg.); Check No.: 288510 in amount of \$786.00 (Fee for Independent claims in excess of three and Claims in excess of twenty); ; Check No.: 288717 in amount of \$180.00 (Fee for Information Disclosure Statement and Return Postcard).	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		RECEIVED
Firm or Individual name	Manatt, Phelps & Phillips, LLP Ziye Joseph Zhou (Reg. No. 41,423)	MAY 09 2003
Signature		
Date	May 2, 2003	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: May 2, 2003			
Typed or printed name	Sheena Hicks		
Signature			
	Date	May 2, 2003	

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PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number 09/811,237 (23451-037)		
MAY 06 2003 PATENT & TRADEMARK OFFICE							
CLAIMS AS FILED - PART I							
(Column 1) (Column 2)					SMALL	OR OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEES	RATE	FEES	
BASIC FEE (37 CFR 1.16(a))				\$ _____		\$ _____	
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*	x\$ =		x\$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*	x =		x =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+	=	+ =		
			TOTAL		OR TOTAL		
* If the difference in column 1 is less than zero, enter "0" in column 2							
CLAIMS AS AMENDED - PART							
(Column 1) (Column 2) (Column 3)					SMALL	OR OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	* 50	Minus ** 25	= 25	x\$ =		x\$ 18 = \$450.00
	Independen (37 CFR 1.16(b))	* 8	Minus *** 4	= 4	x =		x \$84 = \$336.00
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+	=		
			TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE		
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CAR 1.16(c))	*	Minus **	=	x\$ =		x\$ =
	Independen (37 CAR 1.16(b))	*	Minus ***	=	x =		x =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CAR 1.16(d))			+	=		
			TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE		
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CAR 1.16(c))	*	Minus **	=	x\$ =		x\$ =
	Independen (37 CAR 1.16(b))	*	Minus ***	=	x =		x =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CAR 1.16(d))			+	=		
			TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

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